SECTION 500: AADII LIIL (DOING)

501 PURPOSE

This section establishes policies for the DOING component of the Pathway to Self-Reliance, where the progress of Customers is monitored to ensure reasonable and steady progress toward self-reliance.

502 CASE MONITORING

- A. DSR staff shall maintain regular contact with their assigned Customers to provide support, encouragement and assistance to the Customer in achieving their goals.
- B. When a Customer reports a change that may affect their eligibility or assistance amount:
 - 1. the Customer will be informed to provide required verification documents:
 - 2. if the required verification documents are not submitted at the time of the reported change, the Customer shall be given a Checklist which identifies the documents which need to be submitted;
 - 3. Customers will be given up to five (5) working days to provide the required verification documents, otherwise their next monthly benefit payment may not be processed;
 - 4. Upon submittal of the required verification documents, the assigned DSR staff shall determine if the reported change will affect the benefit group's eligibility or monthly assistance amount;
 - 5. Customers shall be provided due process before any change is made to the Benefit Group's eligibility or monthly assistance amount.

503 CASE STAFFING

As necessary, a case staffing shall be conducted to obtain the assistance of DSR staff to ensure that Customers receive appropriate and effective services that provide them with the opportunities and support they need to progress toward self-reliance.

504 REVIEW OF PERSONAL RESPONSIBILITY PLAN

All Personal Responsibility Plans (PRP) must be reviewed with the Customer at least once every four (4) months to ensure realistic Customer progression toward their goals and, eventually, self-reliance.

- A. The PRP review shall include:
 - 1. Assessing progress toward established goals & objectives.
 - 2. Updating goals & objectives as necessary and appropriate.

- 3. Reviewing the Customer's authorized work participation activities to ensure they support the goals and objectives identified in their PRP. As necessary, the Customer's authorized work participation activities shall be updated.
- 4. Verifying and narrating the Customer's Months of Assistance and the number of Months of Assistance that are countable toward the Time Limit (Countable Months).
- 5. Evaluation of the Customer's compliance with DSR Requirements, including establishment of Deprivation or attainment of Legal Guardianship/Custody.
- B. A new PRP shall be developed if there is a significant change in a Customer's circumstances, such as change in: residence; medical or physical condition; family composition; career goals; etc.
- C. A Customer's PRP shall be reviewed on a more frequent basis if it is in the best interest of the Customer's progress toward self-reliance, such as monitoring challenges and successes.

505 MONTHLY UPDATE REPORT

All Customers are required to submit a completed Monthly Update Report (MUR), on a monthly basis, to verify the benefit group's continued eligibility for DSR assistance and to process the Benefit Group's next monthly assistance payment.

- A. A MUR is considered completed when all questions in Part One are answered, all applicable questions in Part Two are answered; and is signed by the Head of Household and, if applicable, their Spouse.
- B. A completed MUR must be received by the close of business (COB) on the fifth (5th) day of each month, unless the following exception applies: EXCEPTION: If the fifth day of the month falls on a weekend, holiday, or authorized office closure day, a completed MUR must be received by the COB on the first working day following the weekend, holiday, or authorized closure day.
- C. Customers who are unable to submit their MUR by the established deadline, due to a reason beyond their control (see 506.H.2), may be authorized by their assigned SCW to fax their MUR, on the condition that the original MUR is received by no later than five (5) working days after the faxed copy is received.
- D. If a change is reported on the MUR which may affect the Benefit group's continued eligibility or benefit amount, the Customer must submit required verification documents within five (5) working days after submittal of a completed MUR.
- E. A benefit group's monthly assistance payment shall not be processed until a completed original MUR, with all required verification documents, are submitted.

- F. Customers who do not submit a completed MUR for two (2) consecutive months, will be subject to the following:
 - 1. Non-payment; and
 - 2. Case closure; and
 - 3. Disqualification for one (1) month from the closure date.
- G. Customers must be provided formal written notification and informed of their appeal rights prior to a penalty being imposed. Once the established deadline for requesting an informal hearing has expired, or the Customer submits a completed and signed *Waiver of Appeal Rights* form, the penalty shall be imposed.

506 PENALTIES

- A. A Benefit Group shall be subject to penalty for non-compliance with one (1) or more of the following DSR requirements:
 - 1. Developing and implementing a PRP by no later than forty-five (45) working days after the date of approval.
 - 2. Adhering to the provisions of an approved PRP.
 - 3. Reviewing and, if necessary, updating a Personal Responsibility Plan.
 - 4. Meeting the Minimum Work Participation Hours requirement, if applicable.
- B. Prior to imposing a First Level penalty, a "Written Warning" shall be issued to the Customer. In addition, the assigned SCW/PCW must conduct a face to face meeting with the Customer to discuss and address the reason(s) for non-compliance with the DSR requirement and review the following sections of the DSR Pathway to Self Reliance (Policy) Manual with the Customer:
 - 1. 206 Customer Responsibilities
 - 2. 404 PRP Development
 - 3. 405 Work Participation requirements
 - 4. 504 PRP Review
 - 5. 506 Penalties
 - 6. 700 Due Process

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C. After issuing a written warning, subsequent non-compliance with a DSR Requirement will result in imposing a penalty to reduce the benefit group's calculated monthly benefit amount in part, or in full, in accordance with the following:

1st Penalty: Reduction of the Benefit Group's approved monthly

benefit amount by 25%

2nd Penalty: Reduction of the Benefit Group's approved monthly

benefit amount by 50%

3rd Penalty: Reduction of the Benefit Group's approved monthly

benefit amount by 75%

4th Penalty: Termination of the Benefit Group's monthly benefits,

closure of case, and disqualification of the head of household and, if applicable, spouse for one year from

the date of closure.

D. Penalties shall be imposed in one (1) month increments until such time that the Customer returns to compliance with the DSR requirement(s) or the Customer reaches the 4th Penalty.

- E. Customers who return to compliance with DSR requirements before reaching the 4th Penalty shall have their benefit amount restored to 100% of their approved monthly benefit amount for the next benefit month.
- F. Non-compliance by a Customer who was previously penalized shall be subject to subsequent penalty as follows:
 - 1. If the current non-compliance occurred less than twelve (12) months from the month for which they were previously penalized, the next penalty will be imposed;
 - 2. If the current non-compliance occurred twelve (12) or more months after the month for which they were previously penalized, the 1st Penalty will be imposed.
- G. Customers must be provided formal written notification and informed of their appeal rights prior to a penalty being imposed. Once the established deadline for requesting an informal hearing has expired, or the Customer submits a completed and signed *Waiver of Appeal Rights* form, the penalty shall be imposed.
- H. Exemptions from penalties
 - 1. A Customer shall not be penalized if they are a single custodial parent caring for a child who is under six (6) years of age and can provide verification of inability (as determined by the DSR) to obtain needed child care due to one of the following reasons: (45 CFR, Part 286, §286.150)

- a. Appropriate child care is not available within a reasonable commuting distance from the home; or
- b. Informal child care by a relative or other arrangements are unavailable or unsuitable; or
- c. Appropriate and affordable formal child care arrangements are unavailable.

Refusal to engage in work participation activities when acceptable, appropriate and affordable child care is available shall <u>not</u> be protected from penalty (45 CFR 286.150(3)(b)).

- 2. Additional exemptions from penalties may be granted, on a limited and case-by-case basis, including, but not limited to:
 - a. Death of an immediate family member.
 - b. Hospitalization of self.
 - c. Hospitalization of an immediate family member which requires the Customer's continuous presence.
 - d. Unforeseen short-term disability.
 - e. Natural disaster.
 - f. The above is not an exhaustive list of possible circumstances for a Good Cause Exemption.
- 3. Exemption of a Customer from penalties will be re-evaluated on a monthly basis and documented in the case file.

507 INTENTIONAL PROGRAM VIOLATION

- A. An Intentional Program Violation (IPV) results when a Customer <u>intentionally</u> commits one of the following acts for the purpose of establishing or maintaining eligibility for benefits, or increasing or preventing a reduction in the amount of benefits:
 - 1. Making a false or misleading statement;
 - 2. Misrepresenting, concealing or withholding facts; or
 - 3. Disposing of assets for the sole purpose of becoming or remaining eligible for DSR assistance.
- B. A DSR staff who suspect, or becomes aware of, a potential Intentional Program Violation (IPV) being committed by a Customer or a member of the Customer's family, must report the potential IPV to the DSR Fraud Investigation Unit (FIU) in accordance with the DSR *Investigation Referral Procedures*. A DSR staff member who does not report a potential IPV they are aware of will be subject to disciplinary action in accordance with the Navajo Nation Personnel Policies Manual.

- C. The FIU will determine if the referral shall be accepted for investigation and, if accepted, conduct an investigation in accordance with the DSR *Investigation Referral Procedures*.
- D. Upon completion of the investigation, the FIU will submit the results of their investigation to the applicable Local Office Supervisor.
- E. The Local Office Supervisor will utilize the FIU investigation results to determine if the Customer shall be disqualified for committing an IPV.
- F. A determination that a Customer committed an Intentional Program Violation (IPV) shall result in the Head of Household and all members of their benefit group being disqualified to receive DSR assistance for a length of time determined in accordance with the following:
 - 1. One (1) year for the first offense;
 - 2. Two (2) years for the second offense; and
 - 3. Permanently for the third offense.
- G. Customers must be provided formal written notification and informed of their appeal rights prior to the disqualification being imposed. Once the established deadline for requesting an informal hearing has expired, or the Customer submits a completed and signed *Waiver of Appeal Rights* form, the disqualification shall be imposed.

508 SUPPORTIVE SERVICES AND INCENTIVES

Subject to availability of funds, supportive services and incentives may be provided to assist Customers in addressing a barrier(s) to their successful participation in an authorized work participation activity and to transition toward gaining and maintaining employment.

509 SHORT-TERM. NON-RECURRING BENEFITS

Subject to funds availability, Short-Term Non-Recurring Benefits (STNRB) may be provided to eligible Needy Families to address a specific crisis or episode of need. STNRB shall not be provided to meet on-going recurring needs and shall not exceed \$5,000.00 for a lifetime.

A. Eligibility Criteria

The following criteria are established for receipt of STNRB:

- 1. The Benefit Group must be receiving DSR assistance and not be in a penalty phase for non-compliance at the time of the request.
- 2. The request must:
 - a. be for a specific crisis situation or episode of need; and
 - b. not be intended to meet recurrent or ongoing needs.
- 3. All other resources must be explored and depleted.

- B. "Crisis situation or Episode of Need" is a situation in which the crisis is beyond the family's control and that impacts the current health and daily livelihood of the benefit group.
- C. The receipt of STNRB shall not count as a month of assistance toward time limit for receipt of benefits.
- D. Allowable expense shall include, but is not limited to:
 - 1. Expenses to temporarily relocate the family if the family is, or might become, homeless due to an unforeseen circumstance such as: domestic violence, burnout, and hazardous living conditions.
 - 2. Minor repairs to the benefit group's primary residence that do not include major construction activities
 - 3. Rental costs to prevent eviction.

NOTE: Before a rental payment is authorized, verification must be obtained from the landlord of cancellation of eviction notice.

4. Costs to heat or cool the home or for reinstating basic and necessary utilities.

NOTE: Before a utility payment is authorized, verification must be obtained from the utility company of cancellation of shut-off notice.

- 5. Food, clothing, personal hygiene items, diapers, infant formula, water, bedding, and other household goods if a family has abandoned their primary home and their belongings.
- 6. Temporary transportation costs such as: a bus pass or necessary repairs of a vehicle owned by the Customer if it is the only vehicle available for accessing essential resources during the crisis or episode of need.

NOTE: Three (3) estimates for costs of repair must be provided prior to any repairs.

510 CUSTOMER PROGRESSION TOWARD SELF RELIANCE

The progress of Customers must be assessed, at a minimum, on an annual basis to measure the Customer's advancement towards self-reliance and the ability to meet their needs. Case progression is designed to document the benefits of services provided.